Case 18-20862-JAD Doc 24 Filed 06/20/18 Entered 06/20/18 07:37:05 Desc Main Document Page 1 of 1

		DUCUII	ICHE I GGC I OLI						
Fill in this information to identify your case:									
Debtor 1	Eric Linsenbigler								
	First Name	Middle Name	Last Name						
Debtor 2	Jennifer Linsenbi	gler							
(Spouse if, filing)	First Name	Middle Name	Last Name						
United States Bankruptcy Court for the:		WESTERN DISTRICT OF PENNSYLVANIA							
Case number (if known)	18-20862-JAD								

## Official Form 423

## **Certification About a Financial Management Course**

12/15

If you are an individual, you must take an approved course about personal financial management if:

- you filed for bankruptcy under chapter 7 or 13, or
- you filed for bankruptcy under chapter 11 and § 1141 (d)(3) does not apply.

In a joint case, each debtor must take the course. 11 U.S.C. §§ 727(a)(11) and 1328(g).

After you finish the course, the provider will give you a certificate. The provider may notify the court that you have completed the course. If the provider does notify the court, you need not file this form. If the provider does not notify the court, then Debtor 1 and Debtor 2 must each file this form with the certificate number before your debts will be discharged.

				,				
		d under chapter by Code.	7 and you	need to file this form, file it	within 60 days after the first date set	for the mee	eting of creditors under § 341	of the
					n, file it before you make the last pay e Bankruptcy Code. Fed. R. Bankr. I		our plan requires or before you	u file a
		es, the court ca h the court and			e financial management course. T	o have the	requirement waived, you m	ust file
Part 1:	Tell	the Court Abo	out the Red	quired Course.				
You m	ust ch	eck one:						
	l co	mpleted an ap	proved co	ourse in personal financial	management:			
	Date	e I took the cou	rse	06/18/2018				
Name of approved provider  MM/ DD / YYYY  Access Counse			MM/ DD / YYYY					
		Access Counseling II	nc.					
	Cer	tificate Number		15317-PAW-DE-03119	96979			
I am not required to complete a course in personal financial management because the court has granted my motion for a waiver of the requirement based on <i>(check one)</i> :								
		Incapacity.	I have a finances		deficiency that makes me incapable	of realizing	or making rational decisions a	about
		Disability.			be unable to complete a course in parter I reasonably tried to do so.	ersonal fina	ancial management in person,	by
		Active duty.	I am currently on active military duty in a military combat zone.					
		Residence.	I live in a district in which the United States trustee (or bankruptcy administrator) has determined that the approved instructional courses cannot adequately meet my needs.					
Part 2:	Sig	n Here						
I certify	that t	he information I	I have prov	vided is true and correct.				
·			•			5.		
/s/ Jennifer Linsenbigler Signature of debtor named on certificate			Jennifer Linsenbigler Printed name of debtor	Date	June 18, 2018 MM / DD / YYY			
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